

**Interim Designation of Agent to Receive Notification
of Claimed Infringement**

Full Legal Name of Service Provider: Windows to Infinity!

Alternative Name(s) of Service Provider (including all names under which the service provider is doing business): _____

Address of Service Provider: PO Box 795, Florence, OR 97439

Name of Agent Designated to Receive Notification of Claimed Infringement: Michael Rogato

Full Address of Designated Agent to which Notification Should be Sent (a P.O. Box or similar designation is not acceptable except where it is the only address that can be used in the geographic location):
PO Box 795, Florence, OR 97439

Telephone Number of Designated Agent: 541-997-6086

Facsimile Number of Designated Agent: 541-997-6086

Email Address of Designated Agent: Sysop@wintfinity.com

Signature of Officer or Representative of the Designating Service Provider: _____
Date: 2-9-99

Typed or Printed Name and Title: Michael Rogato, owner

Note: This Interim Designation Must be Accompanied by a \$20 Filing Fee Made Payable to the Register of Copyrights.

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RECEIVED

**FEB 17 1999
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